

# Introduction to the Facilitated Enrollment Notice: Partial Subsidy Version

## What Is the Purpose of This Notice?

This notice informs people with Medicare that because they qualify for extra help, Medicare will enroll them in Medicare Prescription Drug Plans to make sure they get help paying for their prescription drug costs, if they don't enroll themselves or decline coverage. There are two versions of the notice: one for those who qualify for the full low-income subsidy and one for those who qualify for the partial low-income subsidy. People who qualify for the full low-income subsidy will get extra help to pay their full premiums and deductibles in certain plans and will have minimal cost sharing. People who qualify for the partial low-income subsidy will get extra help and pay reduced premiums, deductibles, and cost sharing.

The notice includes two pages. The first page is a letter printed on green paper with a list of plans for each region that have premiums at or below the benchmark on the back. The other page (front and back) includes questions and answers about Medicare prescription drug coverage.

## Who Will Get This Notice?

Medicare will mail the notice to people who get Supplemental Security Income (SSI) benefits, or belong to Medicare Savings Programs (MSP), or apply and qualify for extra help.

Please note that this mailing is limited to those who currently get their Medicare benefits through the Original Medicare Plan. We also exclude people whose employer or union plan is claiming a retiree drug subsidy on their behalf.

## What Should People Do Next?

People with Medicare should consider their options carefully. If they don't join plans themselves or call 1-800-MEDICARE (1-800-633-4227) to decline Medicare prescription drug coverage, Medicare will enroll them.

If people with Medicare want more information about Medicare prescription drug coverage, they can do the following:

- Visit [www.medicare.gov](http://www.medicare.gov) on the web and get personalized drug plan information. If they don't have computers, their local libraries or senior centers may be able to help them look at this information.
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
- Call their State Health Insurance Assistance Programs (SHIP) for free personalized health insurance counseling. See the "Medicare & You" handbook or call 1-800-MEDICARE for the telephone number for their states.



7500 Security Boulevard  
Baltimore, MD 21244-1850

<BENEFICIARY FULL NAME>  
<ADDRESS>  
<CITY STATE ZIP>

HICN <1234>  
<file creation date>

An Important Message for <Beneficiary Full Name>

**Please keep this letter for your records. You are getting this letter because you qualify for extra help to pay for Medicare prescription drug coverage costs. This means you will get continuous coverage at low cost to you. To get Medicare prescription drug coverage, you will need to choose and join a Medicare drug plan. You have three options to consider.**

**Option 1: You can join a Medicare drug plan on your own.** If you haven't joined a Medicare drug plan yet, please see the list of plans on the back of this letter. If you join one of these plans, you will pay a reduced monthly premium because you qualify for extra help. Call 1-800-MEDICARE (1-800-633-4227) or visit [www.medicare.gov](http://www.medicare.gov) on the web for help comparing plans and joining a plan that works for you.

**Option 2: Medicare will enroll you in a Medicare drug plan on the list.** If you already joined a Medicare drug plan, Medicare won't enroll you in a plan. If you don't join a Medicare drug plan or call 1-800-MEDICARE or this plan and decline Medicare prescription drug coverage by April 30, Medicare will enroll you in <Organization name>'s <Name of plan> and your coverage will begin <enrollment effective date>. With this Medicare drug plan, **you will pay**

- <subsidy % or \$0> of the drug plan premium as a monthly fee,
- up to \$50 for your yearly prescription drug plan deductible, and
- up to 15% of the cost of each prescription you fill that is covered by the plan at one of the plan's participating pharmacies.

For more information about <Name of plan>, please call <Plan's phone number> or visit <Plan website> on the web. If you call the plan, they may ask for your address and other important information.

**Option 3: You can decline to have Medicare enroll you in a plan.** You can choose not to join and not pay a premium. If you currently have other drug coverage, it may be as good as or better than Medicare prescription drug coverage. You may want to keep your current coverage and decline enrollment from Medicare. If you don't want Medicare drug coverage, call 1-800-MEDICARE (1-800-633-4227) and tell us you don't want to enroll. Remember, if you decline, we won't enroll you in a Medicare drug plan now.

If you need help understanding this letter, call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

## Region 8: North Carolina

Below is a list of the Medicare drug plans in your state. If you join one of these plans, you will pay

- \$0 or a monthly fee for your drug plan premium as described in the letter,
- up to \$50 for your yearly prescription drug plan deductible, and
- up to 15% of the cost of each prescription you fill that is covered by the plan at one of the plan's participating pharmacies.

For each plan listed, you will find the name of the organization offering the plan, the plan name, and telephone number. Compare the plans and join one that works for you. You should find out which plans cover the prescriptions you take and what pharmacies you can use to fill prescriptions.

ORGANIZATION	PLAN NAME	TELEPHONE
CIGNA HealthCare	CIGNATURE Rx Value Plan	1-800-735-1459
Humana Inc.	Humana PDP Standard S5884-066	1-800-706-0872
Medco Health Solutions, Inc.	YOURx PLAN	1-800-758-3605
MEMBERHEALTH	Community Care Rx BASIC	1-866-684-5353
PacifiCare Life and Health Insurance Company	PacifiCare Saver Plan	1-800-943-0399
Pennsylvania Life Insurance Company	Prescription Pathway Bronze Plan Reg 8	1-800-765-8900
RxAmerica	Advantage Freedom Plan	1-877-279-0370
RxAmerica	Advantage Star Plan	1-877-279-0370
SilverScript	SilverScript	1-866-552-6106
Unicare	MedicareRx Rewards	1-866-892-5335
United Healthcare	AARP MedicareRx Plan	1-888-867-5564
United Healthcare	United Medicare MedAdvance	1-888-556-6657
WellCare	WellCare Signature	1-888-423-5252

**Note: There are other Medicare drug plans available in your area in addition to those listed above. Each organization listed above may also be offering other Medicare drug plans not listed. If you join a Medicare drug plan that is not one of the plans listed above, you may have to pay a higher monthly premium. You will need to call the Medicare drug plan you want to join or 1-800-MEDICARE (1-800-633-4227) to find out the dollar amount you will pay as your monthly premium fee. TTY users should call 1-877-486-2048.**

**Para obtener una copia de esta información en español, llame GRATIS al 1-800-MEDICARE (1-800-633-4227). Los usuarios de TTY deben llamar al 1-877-486-2048.**

# Important Questions and Answers about Your New Drug Coverage

With a Medicare drug plan, you will get continuous prescription drug coverage at low cost to you. As we age, most people need prescription drugs to stay healthy. Joining gives you peace of mind knowing you have coverage if you need it.

## What should I do now?

Consider your three options carefully. If you don't join a plan on your own or call 1-800-MEDICARE (1-800-633-4227) to decline Medicare prescription drug coverage, Medicare will enroll you in a drug plan. You may pay a premium fee to your plan each month. If you get a bill and don't want the plan, call the plan or 1-800-MEDICARE to decline the coverage. If you want to keep the plan Medicare enrolls you in, you don't need to do anything. You have Medicare prescription drug coverage to help you save money now and protect your future prescription needs. Call your plan to get information about your new drug coverage, and read the materials your plan mails to you. If you need to go to the pharmacy before your plan membership card arrives in the mail, bring this letter or an acknowledgement letter from the plan you enrolled in on your own, or your enrollment confirmation number. You should also bring your Medicare card and photo identification.

**Note:** If you moved recently, or you are getting this letter because you are a representative payee for someone with Medicare, please call the plan to be sure it serves your state or the state the person with Medicare currently lives in. If it doesn't, call 1-800-MEDICARE to choose and join a plan that serves that state.

For information about other Medicare drug plans in your area in 2006, read the list of plans included with this letter. Compare the plans and join one that works for you. You should find out which plans cover the prescriptions you take and what pharmacies you can use to fill prescriptions.

## What is Medicare prescription drug coverage?

Medicare prescription drug coverage is insurance. Private companies provide the coverage through Medicare drug plans. There may be many Medicare drug plans available in your area to choose from.

Medicare drug plans help you pay for both brand-name and generic drugs you need. Plans have a list of drugs they cover. The drug list may not include your specific drug. However, in most cases, a similar drug that is safe and effective should be available.

Medicare drug plans serving your area must contract with pharmacies in your area. Check with the plan to make sure the pharmacies in the plan are convenient to you. Some plans also allow you to get your prescriptions through the mail.

If you need more information about Medicare prescription drug coverage, you can do the following:

- Visit [www.medicare.gov](http://www.medicare.gov) on the web and get personalized drug plan information. If you don't have a computer, your local library or senior center may be able to help you look at this information.
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.
- Call your State Health Insurance Assistance Program (SHIP) for free personalized health insurance counseling. See your copy of the "Medicare & You" handbook or call 1-800-MEDICARE for their telephone number.

## What if I have other prescription drug coverage?

If you have, or are eligible for other types of prescription coverage, read all the materials you get from your insurer or plan provider. Examples of other types of prescription drug coverage include coverage from a current or former employer or union, TRICARE, the Department of Veteran's Affairs, or a Medigap (Medicare Supplement Insurance) policy.

Talk to your benefits administrator, insurer, or plan provider. Joining a Medicare drug plan may affect your current prescription drug coverage and coverage your spouse or other dependents may be getting if they are covered through your plan. Your current coverage may be as good as or better than Medicare prescription drug coverage. You may not need to join a Medicare drug plan. You may need to decline this enrollment from Medicare by calling 1-800-MEDICARE (1-800-633-4227) to keep your current coverage. TTY users should call 1-877-486-2048.

## Can I join a different Medicare drug plan?

Yes. If you join a Medicare drug plan on your own, or if Medicare enrolls you in a drug plan, you can still switch plans. You can switch to a different Medicare drug plan at least once until the end of the calendar year, and once each year after, between November 15 and December 31. To join a different Medicare drug plan, call the new plan to find out how to join. Joining a different plan will disenroll you from your current plan. Your new plan coverage would start the following month.

**Note:** In special circumstances, Medicare may give you other opportunities to switch to another Medicare drug plan. For example, if you permanently move out of your drug plan's service area; if the plan stops offering prescription drug coverage; or if you enter, live in, or leave a nursing home.

## What if I don't want Medicare prescription drug coverage?

If you don't want to join, and you don't want Medicare to enroll you in a Medicare drug plan, call 1-800-MEDICARE (1-800-633-4227) and tell them you don't want to join. TTY users should call 1-877-486-2048. If you join a Medicare drug plan, you have peace of mind knowing the coverage is there if you need it. But remember that if you don't join and need prescription drugs, Medicare won't pay until you join a plan. If you tell Medicare you don't want to join a Medicare drug plan now, you may have to pay a penalty if you decide to join later.